IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF TEXAS 7 JUN 28 AM 10: 37 AUSTIN DIVISION

AUSTIN	CLERK, U.S. DISTRICT COURT				
FRANCES K. GRAHAM	WESTERN DISTRICT OF TEXAS				
V.	§ Case No.A 1 7 CV 0 6 3 4				
LNV CORPORATION, ET ALL	\$ _ \$				
APPLICATION TO PROCEED IN FORMA PAUPERIS AND FINANCIAL AFFIDAVIT IN SUPPORT					
I, Frances K. Graham	, declare that I am the Applicant				
In further support of this application, I answer the following questions:					
Applicant's Name: Frances K. Gra	aham				
Applicant's Home Address: 6716 Sky	y nook Dr Austin, 78745				
Questions Regarding Ability to Pay Employment:					
Are you now employed? Yes No A	am Self Employed				
If yes, how much do you earn per month? \$					

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If no, give month and year of last employment
How much did you earn per month? \$
Name and Address of current or prior employer:
If married, state Spouse's name: Deceased
Is your Spouse employed? Yes No
If working, how much does your spouse earn? \$
Do you receive any funds from relatives or for child support? If so, how much per month do you
receive? \$
Other Income:
Have you received within the past 12 months any income from a business, profession or other form
of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity
payments (such as Social Security benefits), or other sources, including government benefits (such
as A.F.D.C. or Social Security disability benefits)? Yes No
If yes, give the amount and identify the sources:
Received Sources
\$ 55 1744 SST
\$
\$
\$

Cash:		
Have you any cash on hand or money in savings or checking accounts? Yes No		
If yes, state total amount: \$		
If neither you nor your spouse receive income of any kind, how are you able to pay for food and		
shelter?		
Property:		
Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding		
ordinary household furnishings and clothing)? Yes No		
If yes, give value and describe it and say in whose name the property is registered.		
Value Description		
s Zooo Zooz Lincoln Town Car		
\$		
\$		
\$		
Family Status and Dependents:		
Marital Status: Single Married Widowed Separated or Divorced		
Total Number of Dependents:		
Are any of your dependents employed? If so, where:		
How much do your dependent(s) earn monthly? \$		

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List persons you ac	ctually support, your relatio	nship to them.	
Do you pay alimor	ny or child support or any o	ther court-ordered paym	ents? Yes No
If yes, list how mu	ch and describe:		
Monthly Debts of	Applicant and/or Dependent	<u>dents</u>	
Type of Debt	Name of Creditor	Total Debt	Payment
ii .		\$	\$
		\$	\$
		\$	\$
		\$	\$
Monthly Expense	es of Applicant and/or De	<u>pendents</u>	
Rent or House Pay	ment:	s 650°	
Electric & Water I	Bills:	\$ <u>350</u> 00	
Gas:		\$	
Phone:		\$ <u>150</u> 00 \$ 45000	
Insurance:		s _ 450°°	
For what n	urpose:		

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Prescriptions:	\$	
For what purpose:		
Transportation/Car Payments:	\$_&	
For what purpose:		
Medical Bills:	\$	
For what purpose:		
Legal Bills:	\$	
For what purpose:		
Loans:	\$_&	
For what purpose:		
Miscellaneous:	\$	
For what purpose:		
Is there any more information the Court should consider in making its determination?		

AFFIDAVIT OF APPLICANT

I declare under penalty of perjury the above answers and statements to be true and correct to the best of my knowledge. I understand that this affidavit will become an official part of the United States District Court files and that any false or dishonest answer or statements knowingly made by me in this Financial Affidavit are illegal and may subject me to criminal penalties, including any applicable fines or imprisonment, or both.

Signature.

Printed Name: FRANCES K. GRAHAM

Date: 6-29-17